

# CLAIMS

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3						
4						
5						
6		5				
7		5				
8		5				
9		0				
10		0				
11		0				
12	1		1			
13						
14						
15						
16						
17						
18						
19	1		1			
20						
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46						
47						
48						
49						
50						
TOTAL IND.	3	↓	3	↓		↓
TOTAL DEP.	29	←	17	←		←
TOTAL CLAIMS	32		20			

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58						
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96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS